



Los Angeles County
Commission on Disabilities
Celebrating 40 Years of Leadership & Advocacy
www.laccod.org



24TH ANNUAL ACCESS AWARDS LUNCHEON
SOUVENIR PROGRAM ADVERTISING FORM

☐ **Yes**, we want to support the 24th Annual ACCESS AWARDS LUNCHEON. We have selected the following category:

- | | |
|--|---|
| <input type="checkbox"/> FULL PAGE AD-\$1,000 | <input type="checkbox"/> HALF PAGE AD-\$500 |
| <input type="checkbox"/> QUARTER PAGE AD-\$250 | <input type="checkbox"/> BUSINESS CARD AD-\$100 |
| <input type="checkbox"/> IN-KIND DONATIONS | |

We have enclosed a check for the total amount of \$_____.

FULL PAGE AD or TRIBUTE

7.5" X 10"

\$1,000

QUARTER PAGE AD

3 ¾" X 5"

\$250

HALF PAGE AD or TRIBUTE

7.5" X 5"

\$500

BUSINESS CARD

3 ½" X 2"

\$100

The Souvenir Program is vertical and is 8.25" by 10.75". Please provide artwork as an EPS (with type outlined), high resolution (300dpi) PDF, JPG or TIFF file, or if you would like us to prepare your ad or tribute, please type/print your ad or tribute as you would like it to appear. Completed form and Ad can also be emailed to laccod@bos.lacounty.gov

The Deadline for submitting Ad and completed form is

SEPTEMBER 30, 2015.

Please make checks payable to: **LOS ANGELES COUNTY COMMISSION ON DISABILITIES**, and mail with this form to **B-50 Kenneth Hahn Hall of Administration, 500 West Temple Street, Los Angeles, CA 90012**. The Commission on Disabilities is part of a nonprofit organization (**Federal ID#95-6000-927**) with a Federal **501(c)(3)** status.

ORGANIZATION NAME: _____

CONTACT PERSON: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

E-MAIL ADDRESS: _____

For additional information, please contact the Los Angeles County Commission on Disabilities at (213) 974-1053 or e-mail edejesus@bos.lacounty.gov or visit at:

www.laccod.org

